

# EXHIBIT 12

# PHYSICAL THERAPY INITIAL EVALUATION

PATIENT NAME: [REDACTED] ZappinDATE 5/1/14HISTORY 7 <sup>months</sup> year-old, male/female R L handed DX torticollis

History of Presenting Problem:

DOB Oct 6 2013 - Normal delivery  
almost 7 months old

mind developmental delay.

Present Symptoms

- noted at birth & initial pediatrician
- switched pediatrician
- no mention @ 2/4 month visits
- @ 6 months MD visit - Dx torticollis to cervical

Functional Limitations:

mom working to have breast feed (B) side, sleep head born sides.

Aggravated By:

Previous Functional Status:

Relieved By (including meds):

babysitter: [REDACTED]

Past Medical History:

sensitive skin  
baby exuberant

X-rays/Tests:

mom, Claire Comfort.

Previous Treatment:

Social History:

- 1st born

☐ Medication List Reviewed

## EVALUATION

Observations (include gait, posture, edema):

sit (L) SB > holds head SB in all positions.  
supine

Range of Motion:

WNL

\* = pain w/over pressure

\*\* = end range pain

\*\*\* = pain before end of range

Circle - Active Passive A/P  
Hip / ShoulderCircle - Active Passive A/P  
Knee-Ankle / Elbow-Hand

Spine - circle area(s) -

	R	L
Flex		
Ext		
Abd		
Add		
ER		
IR		
SLR		

	R	L
Flex		
Ext		
Supin		
Pron		
DF/Flx		
PF/Ext		
Inv/RD		
Ev/UD		
Grasp		

Active  
ROT R 80%  
L WFL  
SB R 70%  
L WFL

Passive ROT (R)  
SB (R) 90% child protesting any PRON.

pron drop  
rotates ~ 70% R/L

Muscle Strength:

WNL

\* = pain with resistance

Hip / Shoulder			Knee-Ankle / Elbow-Hand			Cervical / Lumbar		
	R	L		R	L		R	L
Flex			Flex			Flex		
Ext			Ext			Ext		
Abd			Supin			Rot		
Add			Pronat			SB		
ER			DF/Flex					
IR			PF/Ext					
			Inv/RD					
			EV/UD					
			Grasp					

Resisted Tests in neutral:

Palpation:

pull to sit does initiate c head  
 (+) marked spasm (L) UT / SCM / lev. scap.

Neurological Findings (sensation, reflexes):

- able to roll supine → prone to (R), less to (L).

Special Tests:

(I) sit for only a few seconds →  
 not yet able to reach in sitting  
 - prone prop on elbows only. (hip & down arm)

## ASSESSMENT

Almost 7mths of a infant referred to PT & dx of  
 torticollis. (P) (L) torticollis c spasm, stiffness, weakness  
 & mild developmental delay of gross motor skills.

PRECAUTIONS:

**GOALS** - ☐ Eliminate Edema

☒ Improve Strength normal Grade

☐ Normalize Soft Tissue Integrity

☐ Normalize Gait Pattern

Functional Outcomes:

pt will reach developmental milestones in timely  
 fashion c neutral positioning of cervical spine.

**FIRST TREATMENT:**

☐ MH ☐ ES ☐ ICE ☐ US ☒ STM/MFR (L) ☐ JT.MOB ☐ TRACTION

location/type:

THER.EX/NMR:

TREATMENT PLAN:

- education  
 in family  
 - manual therapy  
 - developmental postures  
 interval: 7/23/13

(P.T. signature)

Frequency and Duration:

BiW x 6 weeks - 8  
 wks.